

RECORDING COVER PAGE

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APN# 1318-26-101-006  
11 digit Assessor's Parcel Number may be obtained at:  
<http://redrock.co.clark.nv.us/assrealprop/ownr.aspx>

TITLE OF DOCUMENT (DO NOT Abbreviate)

Limited Durable Power Attorney  
\_\_\_\_\_  
\_\_\_\_\_

Title of the Document on cover page must be EXACTLY as it appears on the first page of the document to be recorded.

Recording requested by:

Property Relief, LLC  
\_\_\_\_\_

Return to:

Name Colin & Sybil Hollingsworth  
\_\_\_\_\_

Address P.O. Box 6757  
\_\_\_\_\_

City/State/Zip Sevierville, TN 37864  
\_\_\_\_\_

This page provides additional information required by NRS 111.312 Sections 1-2.

An additional recording fee of \$1.00 will apply.

To print this document properly—do not use page scaling.



**Prepared By and Return To:**

Property Relief  
1148 Wagner Dr #101  
Sevierville, TN 37862

**LIMITED DURABLE POWER ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS That the undersigned,  
Colin R. Hollingsworth, Sybil E. Hollingsworth ("Principal(s)") being of  
legal age, DO(ES) HEREBY CONSTITUTE and appoint Property Relief, LLC. also of legal age, as Principal(s) true and  
lawful attorney-in-fact for and on behalf and in Principal(s) name, place and stead to do any and all of the following acts:  
To perform any and all acts necessary to convey the real and personal property legally described as:

Resort/Unit/Week# Kingsbury Crossing - STATELINE  
in CLARK County, State of NV and made a part hereof.

This power includes but is not limited to contacting the resort on Principal(s) behalf, making inquires into the status of  
accounts affecting this property, making reservations, banking weeks, ordering death certificates, collecting proceeds,  
executing any and all documents, notarial or otherwise, in the names as written below or in other form and all other issues  
that are deemed necessary in Agent's discretion to carry out the transfer of said property. This power shall not be  
affected by the disability of the Principal(s). Grantee has the power to perform all and every act and thing fully and to the  
same extent as the Principal(s) could do if personally present, with full power of substitution and revocation.

AND THE PRINCIPAL(S) DO(ES) HEREBY RATIFY AND CONFIRM all whatsoever that the said attorney-in-fact or duly  
appointed substitute shall do or cause to be done by virtue of the powers hereby granted.

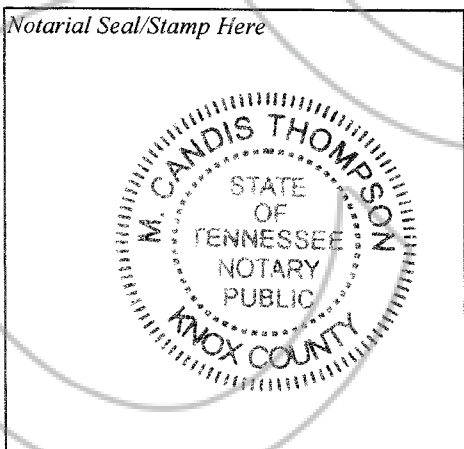
SUBSCRIBED AND SWORN BEFORE ME, M. CANDIS THOMPSON, a Notary Public,  
this Power of Attorney is executed in the County of KNOX, State of TENNESSEE  
this 22 day of MAY, 20 11.

**WITNESSES:**

Grantor(s) signature is attested by these witnesses who are NOT the Grantor(s). The Notary may also sign as ONE witness.

WITNESS 1: ELVA RUPP  
Print Name: ELVA RUPP  
Sign above

WITNESS 2: M. Candis Thompson  
Print Name: M. CANDIS THOMPSON  
Sign above



**PRINCIPAL(S):**

Signature: Colin R. Hollingsworth

Print Name: COLIN R. HOLLINGSWORTH

Signature: Sybil E. Hollingsworth

Print Name: Sybil E. Hollingsworth

WITNESS my hand and official seal:  
Signature: M. Candis Thompson

My Commission Expires: \_\_\_\_\_

My Commission Expires  
May 4, 2013